

MULTIPLE INDEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. <i>91621,788</i>	FILING DATE					
						APPLICANT/						
						CLAIMS						
	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	1	1	1	1	1		51					
2	1	1	1	1	1		52					
3	2	2	2	2	2		53					
4	1	1	1	1	1		54					
5	1	1	1	1	1		55					
6	1	1	1	1	1		56					
7	1	1	1	1	1		57					
8	1	1	1	1	1		58					
9	1	1	1	1	1		59					
10	1	1	1	1	1		60					
11	1	1	1	1	1		61					
12	1	1	1	1	1		62					
13	2	2	2	2	2		63					
14	1	1	1	1	1		64					
15	1	1	1	1	1		65					
16	1	1	1	1	1		66					
17	2	2	2	2	2		67					
18	1	1	1	1	1		68					
19	1	1	1	1	1		69					
20	1	1	1	1	1		70					
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45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	1	1	1	1	1		TOTAL IND.	1	1	1	1	
TOTAL DEP.	10	1	14	1	9		TOTAL DEP.	1	1	1	1	
TOTAL CLAIMS	13	1	15	1	11		TOTAL CLAIMS					

PTO-1200 (2-76)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
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